

# Key Recommendations: Strengthening Public Health Capacity and Fostering Regional Solidarity

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## Introduction

The COVID-19 pandemic revealed global healthcare system vulnerabilities and societal impacts (1). Many countries experienced disruptions in health service delivery, exacerbating challenges in essential health services, human resources, and medical supply allocation (2, 3). As such, enhanced capabilities for crisis management and virus transmission control are warranted.

The Association of Southeast Asian Nation (ASEAN) region, including countries in Southeast Asia, faced significant financial losses and strains on healthcare infrastructure during the pandemic (4-6). International cooperation and coordination have been emphasised as key strategies for the region to strengthen collective and harmonised response measures to control future outbreaks (7, 8).

The Southeast Asia Health Security Roundtable Series was initiated to foster regional dialogue and share lessons learned from the pandemic, focusing on enhancing health security across ASEAN nations. This brief provides a summary of key recommendations from one of the series, specifically addressing the health system impact of pandemics. For further information, you may read the full report here: (<https://www.hitap.net/en/documents/189899>)



# Connectedness and Commonality

## 1 Governance



- A shared vision among ASEAN member states (AMS) for collective health security goals should be developed, recognised, and promoted.
- This vision should be used to guide collaborative actions and synergise efforts to address regional health challenges, while reflecting the diverse needs of communities.

## 2 Harmonisation

- Regional harmonisation in health practices, including pooled procurement of medical supplies, vaccination schedules, and standardisation of life-saving medical devices should be explored and pursued.
- Implementation of systematic evidence synthesis such as health technology assessments (HTA) should be promoted to support resource allocation, especially in healthcare provision, to support Universal Health Coverage (UHC) and improve efficiency and consistency in healthcare delivery across AMS.
- Existing and emerging initiatives should be leveraged to achieve the objectives of “Connectedness and Commonality”, for example through the official channels of ASEAN such as the ASEAN secretariat, or ASEAN Centre for Public Health Emergencies and Emerging Diseases (ACPHEED).



# Control and Coverage

## 3 Health Intelligence



- Surveillance systems should be strengthened at all levels (local, national, and regional scales). For example, district health surveillance should be expanded, with staff training for outbreak investigation to ensure data quality.
- The system should transition from traditional data repositories to accessible public information platforms. Engagement with relevant stakeholders in discussions to establish open data protocols is encouraged.



- Accessibility to surveillance data with good quality supports early warning, outbreak preparation, and evidence-based policy formulation with transparency.
- Language barriers in public information platforms should be addressed to ensure understanding and usability of information among AMS.

## 4 Health Equity

- To strengthen health security, issues on health resilience and health equity should be considered concurrently.
- UHC should be pursued to ensure fair and equitable healthcare access. Vulnerable populations should be prioritised, while migrant health should also be considered, to develop an inclusive healthcare system.
- Evidence-based practices should be adopted to support decision-making to address disparities.



## Capacity Enhancement

### 5 System Efficiency



- Built-in resilience of health systems should be designed to support daily operations, with the capability to escalate for managing increased workloads during emergencies. For example, digital technologies may be used to reduce, simplify, and automate administrative tasks, eliminating the burden on health personnel.
- Modern technologies such as artificial intelligence (AI) and digital health tools should be incorporated to monitor and predict outbreaks, streamline routine tasks, and improve healthcare access, especially in underserved areas.

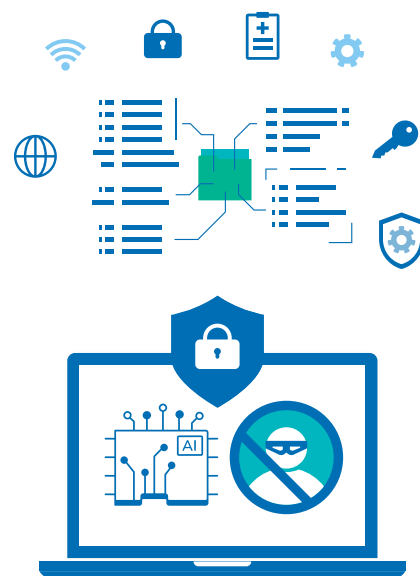
### 6 Co-creation of Future Proofing Innovations

- New healthcare innovations (e.g., teleconsultation platforms) should be designed with the considerations of flexibility and scalability, adaptable to unforeseen circumstances such as new pandemics.
- Relevant stakeholders such as technology partners and the private sector should be consulted and engaged with to develop robust and adaptable technologies and



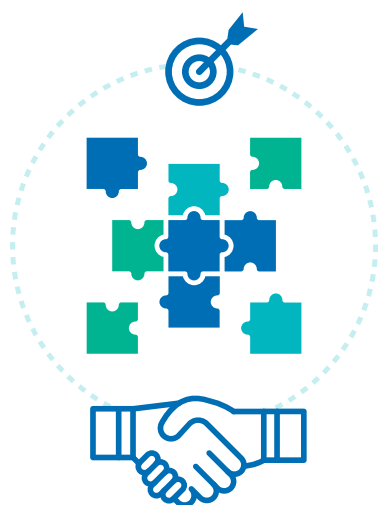
innovations. However, involving decisionmakers in the discussions can be useful in terms of supporting the implementation and sustainability of new initiatives.

- A sandbox for piloting new healthcare technologies or initiatives in manageable settings before widespread implementation is useful. This allows for experimentation and refinement which can ensure effective integration of innovations within the health system.
- While potential threats from evolving technologies, such as misinformation and data security concerns, must be recognised, these technologies offer solutions for tackling such threats. However, thoughtful regulation and investment in infrastructure and education should be established at different levels, to ensure that technology-driven solutions are accessible and inclusive.



## Collaborations and Community

### 7 Leverage Diversity in the Region



- Diversity in terms of capacity levels, areas of expertise, or contextual settings within the region should be recognised and addressed when designing strategies for the health sector, where possible.
- ASEAN's collective strengths should be leveraged so that AMS can learn from each other and enhance resilience through resource exchange or pooling, including sharing best practices. Activities to promote capacity of health workforce may be jointly conducted, for example, a joint training programs in Hazard Identification, Risk Assessment, and Risk Control (HIRARC) or a joint investigation in certain areas.

### 8 Beyond Health and ASEAN

- Dialogues and collaborations between health and non-health sectors, such as ministries of interior, tourism authorities, and police departments, should be maintained.
- Communication channels and frameworks to integrate cross-sectoral coordination into emergency preparedness and response plans should be developed.
- Public-private partnerships to address issues such as



surge capacity of hospitals, mechanisms for health service reimbursement and health insurance, and vaccination campaigns should be encouraged.

- Joint learning collaborations between AMS and supranational organisations (e.g., World Health Organisation, World Bank) may be sought to strengthen certain areas of expertise.



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## Local Community Engagement



- Opportunities should be provided for community members to actively engage in health initiatives, so that public health authorities and relevant decisionmakers can understand local needs and behaviours.
- Strong community ties will promote a coordinated responses across different areas, which is essential for managing the spread of pandemics and infodemics.
- Health literacy should be promoted, and local communities should be empowered to critically assess information publicly available. Depending on the context, AMS may adopt diverse approaches to community engagement and communication.
- Given an overabundance of information, it is imperative to establish a nationally recognised and trusted source of information for community.

## Communication

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### Knowledge Translation and Dissemination

- Strategic dissemination plans should be developed for the knowledge initiatives created to support regional health security and resilience. This will allow insights and recommendations derived from these initiatives to create meaningful impact.
- Relevant stakeholders should be identified, such as the ASEAN Secretariat and International Health Regulations (IHR) working group or the Intergovernmental Negotiating Body (INB).
- Existing platforms and networks such as ASEAN health cluster meetings, ASEAN Senior Officials' Meetings (SOM), the Global Health Security Conference, and the Prince Mahidol Award Conference (PMAC) should be leveraged to



communicate key messages effectively to decision-makers and the broader audience.

- Using various communication channels, such as reports, policy briefs, infographics, and digital media, can help ensure that key messages reach a broader audience in a format that is accessible and understandable.



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